Appendix B: Overview of items selected from all grant proposals.

Study characteristics	
A General information	
programme	
round #	
date of submission	
study type (0 or 1)	1 qualitative
	2 cross-sectional
	3 RCT
	4 controlled non-randomized
	5 longitudinal cohort
	6 literature review
	7 data synthesis
HTA (0 or 1)	HTA (0 or 1)
HTA trial-based (0 or 1)	
HTA model-based (0 or 1)	
both trial-based and model-based (0 or 1)	
Changes compared to step 1 scores made to study type or HTA aspects after filling out tabs?	
number of substudies	
main applicant University (0 or 1)	
main applicant UMC (0 or 1)	
main applicant other (0 or 1)	
Date start of study	
Study duration (total project) in months	
GGG yes/no	
All can be scored either by 1/0 for yes/no (or amount) or nr (not reported), ?/dk (if in doubt) or na (not applicable)	
B information on size of costs/budget	
final report enclosed? 1/0	
progress report enclosed? 1/0	
total budget in €	
total budget for personnel in €	
	total fte PhD students
	total fte postdoc
	total fte MD researcher
	total fte non-scientific
	total fte other
Total fte all	sum of the above
	specify in text ftes other (e.g. professor, project leader , HTA expert etc)
expertise included in projectgroup:	score (1/0) present
	clinical
	statistical/methodological
	HTA
	Other expertise
	specify other in tekst
expertise included in budget:	score (1/0) present
	clinical
	statistical/methodol
	HTA
	Other expertise
	specify other in tekst
more than one clinical specialism in projectgroup?	(1/0)
part of non-personnel costs intended to pay personnel/expertise (e.g. subcontracting)	(1/0)
amount co-finaning in €	
sub-contractors (VAT) involved? 1/0	
Amount of budget that is inclusive of VAT (€)	
Is the validity of the budget questionable? 1/0	
If questionable, please explain shortly	
co-financing	
C Details on content of research	
Drug research (0 or 1)	
Placebo (0 or 1)	
GCP required?	0= no, 1 = yes, ? = don't know - please check
primary care	disciplines involved (e.g. GP, POH)
secondary care	disciplines involved (ie mentioned on proposal as project participant, e.g. neurosurgeon)
other care	disciplines involved (e.g. mental health care inst)
type of care	consult/poli/outpatient (1/0)
	daycare (1/0)
	admission (1/0)
	IC (1/0)
existing intervention	part of care as usual (1/0)
	Reimbursed from Basic insurance (1/0)
development of intervention part of study? (1/0)	
Organisation of care rather than intervention main topic of study	(1/0)

Study characteristics	
Qualitative research	
Duration	months
Type of information gathering	Desk top (conceptual) document analysis? (0/# studies)
	Focus groups (0/#groups)
	Interviews by phone (0/#interviews)
	Interviews face to face (0/#interviews)
	Interviews by mail (0/#interviews)
	observational research (0/#visits)
	Multiple methods (0/1)
Number of participants (0./total over all focus groups/interviews)	
Number of study locations	
Training required for team members (1/0)	
Post processing	Audiotaped (1/0)
	Transcription of audiotape (1/0)
	Specific techniques like data-matrix….(1/0)
	Researcher triangulation coding (1/0)
	more ad-hoc qualitative research (1/0)
	SOFTWARE USED (tekst: eg. NVIVO)
Involvement of Stakeholders, e.g. patientpanel, advisory board	
	#external advisors/stakeholders involved
Coordination costs.	size of study team, # project participants
	# institutions involved
	# study locations
	Large travel distances (>150 km) for investigators for regular visits (>6 per year)
Payment for participants of focus groups or interviews ?	

Study characteristics	
Data synthesis	
	Total study duration (Months)
Meta-analysis	
o Based on aggregated data / patient level data	
# strategies compared	
o Meta-regression?	
o Subgroups pre-specified?	
o Number of comparisons (#)	
Decision-analytic model	
o Existing model	
patient level simulation	
cohort simulation	
decision tree	
o Regression analyses planned to inform input parameters	
o Microcosting y/n	
o Subgroups pre-specified?	
o Number of comparators	
o Value of information analyses planned	
new dataset (1/0)	
new ict structure (1/0)	
Need to buy additional data?	
Costs for special software	
Involvement of Stakeholders, e.g. patientpanel, advisory board	
	#external advisors/stakeholders involved
Coordination costs.	size of study team, # project participants
	# institutions involved

Study characteristics	
Observational cross sectional	
Study Size (of only cross sectional study)	Sample size (n)
	Total study duration (Months) (itt project)
	# Locations
	Training required for team members (1/0)
· Main aim is safety (1/0)	
· Vulnerable group (1/0)	
Questionnaires used	(1/0)
HTA surveys involved	For costs (E.g. TIC-P) (1/0)
	For QOL (e.g. EQ5D) (1/0)
Total # questionnaires if given	(number)
Data gathering by way of	Interviews (0/1)
	Phone interviews (0/1)
	pen and paper surveys (0/1)
	online surveys (0/1)
Total # questionnaires developed for study	
Total # questionnaires requiring payment	
Filling out questionnaires involves substantial extra time from health care professional NOT being an interviewer	(1/0)
Clinical measurements	Expensive tests involved (1/0)
	Imaging (1/0)
	Imaging (#)
	Genetics (1/0)
	Genetics (#)
	Biomarkers (1/0)
	Biomarkers (#)
	remarks concerning other effects on costs of clinical measurements
Tests part of regular care (1/0)	
tests re-analysis of existing samples? (1/0)	
extraction of data from existing records (1/0)	
	Number of records/size of database
	Linking required (1/0)
	new dataset (1/0)
	new ict structure (1/0)
	fees for use of data (1/0)
Basic Statistics(available in most software: SPSS. undergraduate study level)	
Complex methods (require statistical expertise, R/Stata/..etc)	
Economic analyses	Microcosting (1/0)
	Budget-impact analysis (1/0)
Involvement of Stakeholders, e.g. patientpanel, advisory board	
	#external advisors/stakeholders involved
Coordination costs.	size of study team, # project participants
	# institutions involved
	Large travel distances (>150 km) for investigators for regular visits (>6 per year)
Shipment costs for bio-materials (1/0)	
Thrusted third party involved (1/0)	

Study characteristics	
Literature review	
Study Size	Number of studies after first search
	Systematic (1/0)
	Total study duration (Months)
	Double checking during selection phase (1/0)
	Number of studies after selection phase
	Double data extraction (1/0)
Data extraction	Number of items
	Quality scores (1/0)
Economic analyses (remainder see data synthesis part of the study)	
	Transferability tested (1/0)
Involvement of Stakeholders, e.g. patientpanel, advisory board	
	#external advisors/stakeholders involved
Coordination costs.	size of study team, # project participants
	# institutions involved

Study characteristics	
RCT	
Study Size	Sample size (n)
	Total study duration (Months)
	Follow-up time (months)
	# study arms
	# study locations
	Randomisation procedure. (Block randomization (0) or more complex (1))
	Frequency of outcome measurement (maximum number of times)
	Training required for team members (1/0)
· Placebo (1/0)	
· Main aim is safety (1/0)	
· Registered drug (1/0)	
· Vulnerable group (1/0)	
Questionnaires used (1/0)	
HTA surveys involved	For costs (E.g. TIC-P) (1/0)
	For QOL (e.g. EQ5D) (1/0)
Total # questionnaires if given	
Data gathering by way of	Interviews (1/0)
	Phone interviews (1/0)
	pen and paper surveys (1/0)
	online surveys (1/0)
Total # questionnaires developed for study	
Total # questionnaires requiring payment	
Filling out questionnaires involves substantial extra time from health care professional NOT being an interviewer	(1/0)
Clinical measurements	Expensive tests involved (1/0)
	Imaging (1/0)
	Imaging (#)
	Genetics (1/0)
	Genetics (#)
	Biomarkers (1/0)
	Biomarkers (#)
	remarks concerning other effects on costs of clinical measurements
Tests part of regular care (1/0)	
tests re-analysis of existing samples? (1/0)	
extraction of data from existing records (1/0)	
	Number of records/size of database
	Linking required (1/0)
	new dataset (1/0)
	new ict structure (1/0)
Basic Statistics(available in most software: SPSS. undergraduate study level)	
Complex methods (require statistical expertise, R/Stata/..etc)	
Economic analyses	Microcosting (1/0)
	Budget-impact analysis (1/0)
Direct patient level cost-effectiveness analysis performed (piggy back) (1/0)	
o Foreseeable patient health insurance problems 1/0	
o Pharmaceutical company delivers drug (for free?) 1/0	
o When mentioned: high risk/moderate risk/low risk?	
Trusted third party involved (1/0)	
Involvement of Stakeholders, e.g. patientpanel, advisory board	
	#external advisors/stakeholders involved
Coordination costs.	size of study team, # project participants
	# institutions involved
Shipment costs for bio-materials (1/0)	
fees for inclusion of patients paid to clinicians	(0/amount per patient in €)

Study characteristics	
Non-randomized controlled study	
Study Size	Sample size (n)
	Total study duration (Months)
	Follow-up time (months)
	# study arms
	# Locations
	Number of study locations
	Frequency of outcome measurement (maximum number of times)
	Training required for team members (1/0)
· Main aim is safety (1/0)	
· Registered drug (1/0)	
· Vulnerable group (1/0)	
Questionnaires used (1/0)	
HTA surveys involved	For costs (E.g. TIC-P) (1/0)
	For QOL (e.g. EQ5D) (1/0)
Total # questionnaires if given	
Data gathering by way of	Interviews (1/0)
	Phone interviews (1/0)
	pen and paper surveys (1/0)
	online surveys (1/0)
Total # questionnaires developed for study	
Total # questionnaires requiring payment	
Filling out questionnaires involves substantial extra time from health care professional NOT being an interviewer	(1/0)
Clinical measurements	Expensive tests involved (1/0)
	Imaging (1/0)
	Imaging (#)
	Genetics (1/0)
	Genetics (#)
	Biomarkers (1/0)
	Biomarkers (#)
	remarks concerning other effects on costs of clinical measurements
Tests part of regular care (1/0)	
tests re-analysis of existing samples? (1/0)	
extraction of data from existing records (1/0)	
	Number of records/size of database
	Linking required (1/0)
	new dataset (1/0)
	new ict structure (1/0)
Basic Statistics(available in most software: SPSS. undergraduate study level)	
Complex methods (require statistical expertise, R/Stata/..etc)	
Economic analyses	Microcosting (1/0)
	Budget-impact analysis (1/0)
Direct patient level cost-effectiveness analysis performed (piggy back) (1/0)	
o Foreseeable patient health insurance problems y/n	
o Pharmaceutical company delivers drug (for free?) y/n	
o When mentioned: high risk/moderate risk/low risk?	
Thrusted third party involved (1/0)	
Involvement of Stakeholders, e.g. patientpanel, advisory board	
	#external advisors/stakeholders involved
Coordination costs.	size of study team, # project participants
	# institutions involved
Shipment costs for bio-materials (1/0)	
fees for inclusion of patients paid to clinicians	(0/amount per patient in €)

Study characteristics	
Observational Longitudinal	
Study Size	Sample size, total at end of follow-up (n)
	Open cohort? (ie new patients included along follow-up) (1/0)
	Total study duration (Months)
	Follow-up time (months)
	Number of study locations
	Number of outcomes
	Frequency of outcome measurement (maximum number of times)
	Training required for team members (1/0)
· Main aim is safety (1/0)	
· Vulnerable group (1/0)	
Questionnaires used (1/0)	
HTA surveys involved	For costs (E.g. TIC-P) (1/0)
	For QOL (e.g. EQ5D) (1/0)
Total # questionnaires if given	
Data gathering by way of	Interviews (1/0)
	Phone interviews (1/0)
	pen and paper surveys (1/0)
	online surveys (1/0)
Total # questionnaires developed for study	
Total # questionnaires requiring payment	
Filling out questionnaires involves substantial extra time from health care professional NOT being an interviewer	(1/0)
Clinical measurements	Expensive tests involved (1/0)
	Imaging (1/0)
	Imaging (#)
	Genetics (1/0)
	Genetics (#)
	Biomarkers (1/0)
	Biomarkers (#)
	remarks concerning other effects on costs of clinical measurements
Tests part of regular care (1/0)	
tests re-analysis of existing samples? (1/0)	
extraction of data from existing records (1/0)	
	Number of records/size of database
	Linking required (1/0)
	new dataset (1/0)
	new ict structure (1/0)
Basic Statistics(available in most software: SPSS. undergraduate study level)	
Complex methods (require statistical expertise, R/Stata/..etc)	
Economic analyses	Microcosting (1/0)
	Budget-impact analysis (1/0)
Thrusted third party involved (1/0)	
Involvement of Stakeholders, e.g. patientpanel, advisory board	
	#external advisors/stakeholders involved
Coordination costs.	size of study team, # project participants
	# institutions involved
Shipment costs for bio-materials (1/0)	
fees for inclusion of patients paid to clinicians	(0/amount per patient in €)